DOCUMENT RESUME

ED 080 807 CE 000 020

TITLE	Inactive Health Personnel Project in New Hampshire. Final Report.
INSTITUTION	New Hampshire Health Careers Council, Concord.
SPONS AGENCY	Public Health Service (DHEW), Arlington, Va. Bureau of Health Manpower.
REPORT NO	PH-108-67-258
PUB DATE	Nov 69
NOTE	95p.
EDRS PRICE	MF-$0.65 HC-$3.29
DESCRIPTORS	Dental Assistants; Dental Hygienists; Health Occupations; Health Occupations Education; *Health Personnel; Medical Technologists; *Nurses; *Nursing; Occupational Therapists; Paramedical Occupations; *Refresher Courses; Televised Instruction; *Vocational Retraining
IDENTIFIERS	*New Hampshire; Return to Nursing

ABSTRACT

With the goal of more efficient utilization of existing health manpowers in New Hampshire, data were gathered on inactive medical personnel, and the feasibility of various methods of refresher training was explored. Because of New Hampshire's intrinsic characteristics of climate and scattered population and the scarcity of qualified instructors, plans have been made to broadcast on educational television a fifteen part series, "Return to Nursing," developed at Russell Sage College. This will be followed by a concentrated period of clinical experience for nurses. Funding is being sought. The need for reactivating auxiliary dental personnel was assessed by surveying dentists, dental hygienists, and dental assistants. It is felt that refresher training will best be accomplished on-the-job or through the school for Dental Hygienists to be opened soon. Programs for reactivation of medical technologists and occupational therapists were found to be unnecessary. Many potential health workers cite inadequate salaries, inappropriate benefits, and frustrating working conditions as reasons for finding other employment. The appendixes contain copies of form letters and questionnaires used in this study. (MS)

FILMED FROM BEST AVAILABLE CO

ED 080807

U.S. DEPARTMENT OF HEALTH, EDUCATION & WELFARE
NATIONAL INSTITUTE OF EDUCATION
THIS DOCUMENT HAS BEEN REPRODUCED EXACTLY AS RECEIVED FROM THE PERSON OR ORGANIZATION ORIGINATING IT. POINTS OF VIEW OR OPINIONS STATED DO NOT NECESSARILY REPRESENT OFFICIAL NATIONAL INSTITUTE OF EDUCATION POSITION OR POLICY

N.H.
I-30(3) NH007

CE

INACTIVE HEALTH PERSONNEL PROJECT IN NEW HAMPSHIRE

FINAL REPORT

JULY 1, 1967 - NOVEMBER 30, 1969

CE 000 020

NEW HAMPSHIRE HEALTH CAREERS COUNCIL

ED 080807

INACTIVE HEALTH PERSONNEL

PROJECT IN NEW HAMPSHIRE

FINAL REPORT

Report of a Study Pursuant to
U. S. Public Health Service Contract
Number P. H. 108-67-258

PROJECT STAFF

Director: Elizabeth F. Natti
Coordinator: Barbara T. Jones
Secretary: Marilyn G. Ross

November 1969

New Hampshire Health Careers Council
61 South Spring Street
Concord, New Hampshire

TABLE OF CONTENTS

	PAGE
Preface	1
Summary	3
Refresher Courses for Registered Nurses	7
Survey of Licensed Practical Nurses	19
Survey of Dentists and Dental Auxiliary Personnel	22
Survey of Medical Technologists	31
Survey of Occupational Therapists	35
Survey of Dietitians	3
Survey of Social Workers	41
Additional Activities	42
Reflections and Problems Encountered	45
Appendix Index	46

PREFACE

This is the final report of the Inactive Health Personnel Project of New Hampshire.

The Project originated as a result of a one-year contract between the Bureau of Health Manpower, Public Health Service, and the New Hampshire Health Careers Council. The original 12-month contract covered the period from July 1, 1967 to January 30, 1968, with monthly extensions allowed thereafter through November 30, 1968. The activities initiated and the information gathered during this period were presented in a Twelve-Month Report dated November, 1968.

A final extension to November 30, 1969 provided for an evaluation and follow-up of all previous accomplishments.

The overall objective of the project was to increase the supply of skilled health manpower by:

1) location and recruitment of inactive health personnel,
2) promotion of educational programs designed for the reactivation of inactive health personnel,
3) assessing the employment opportunities by category of personnel and geographical area, and
4) assisting in the return to employment of as many inactive health personnel as possible.

This report presents in summary the scope of work completed, the evaluation thereof, and recommendations for continuation of these efforts as an on-going part of in-service or continuing education programs throughout the State.

Both the Project Director and the Project Coordinator wish to recognize and acknowledge the many individuals, professional associations, and health care facilities that contributed so greatly in time, effort and thought to our Project.

SUMMARY

During the first year of the Project, efforts to reactivate inactive health personnel in New Hampshire followed a systematic procedure that consisted of contacting professional organizations and identifying the inactive members through questionnaires. Data on those interested in returning to active employment was compiled as to geographical location, duration of inactivity and date of availability for refresher training. Hospitals were contacted throughout the State regarding their need for additional personnel and the extent of local interest for refresher training courses. On the basis of the findings, refresher programs for professional nurses were conducted in six areas in the State. Owing to small numbers and scattered location of those interested, no formal training programs were developed for any of the other categories of health workers.

From September, 1968 to March 1969, the Project was continued on a minimal basis owing to the difficulty in obtaining a permanent replacement for the position of Project Coordinator. During this time the Project inevitably lost considerable momentum. In March, 1969, a new Coordinator reactivated the Project, starting with an evaluation of the R. N. refresher courses that had been conducted.

Hospitals and professional health associations throughout the State were again contacted to determine the current need for trained personnel and the demand for refresher training programs. It was found repeatedly that these needs were few and scattered and that there were no qualified instructors available in many of the remote regions of the State. It was difficult to plan centralized training programs due to the intrinsic characteristics of New Hampshire and its cultural patterns, i.e., the

long, cold winters when travel is difficult, the summers with the congested highways and seasonal duties created by the tourist influx, not to mention the deeply traditional reticence of the native New England housewife to leave her fireside for trips beyond a ten mile radius.

Another explanation for the low number of persons interested in returning to work lies in the fact that there is a lower percentage of inactive nurses in New Hampshire than in the remainder of the country. The 1968-69 statistics, as compiled by the New Hampshire Nurses Association, indicated that of the 5,373 Registered Professional Nurses in New Hampshire, 3,908, or approximately 73% of them were employed. The national figures for 1968 showed that of the 1,240,000 registered nurses in the United States, 659,000, or only a little more than 50% were employed. This proportion is further reflected in the ratio of nurses to population which is 521 per 100,000 in New Hampshire, and 324 per 100,000 in the United States as a whole. Our studies conducted on the registered nurse refresher courses held in New Hampshire suggested that the R. N.'s who remained inactive had family commitments or some equally binding personal reason that prevented them from returning to nursing, therefore, the reservoir of available inactive nurses was actually very small. It is also interesting to note that 30% of the active nurses in New Hampshire are over 50 years of age. This strongly suggests that nurses in New Hampshire who have been inactive while their children were small, later returned to nursing in greater numbers than those in the rest of the United States.

One of the major problems encountered in establishing refresher programs, especially in isolated areas of New Hampshire, is the lack of qualified instructors. This is explained statistically with the figure of 5.9% of the professional nurses in New Hampshire holding baccalaureate degrees with

only 1.9% having higher than a baccalaureate degree. This is considerably lower than the national figures of 10.6% and 2.5% respectively.

As it became apparent that there was little need or demand for refresher courses, the Coordinator turned to other problems that seemed to come under the overall concern of increasing the availability of health manpower. Thus, an exploration of the needs and qualifications of a group of highly motivated Practical Nurses, who were licensed by waiver, was undertaken. (See Survey of Licensed Practical Nurses, page 19)

As the Project moved into the final months, efforts were made to devise methods in which the purposes and activities of the program could be continued through other existing agencies. With this in mind, and the realization that there were still small groups of inactive nurses in isolated areas who wanted to take refresher courses, we investigated the possibility of using the televised series, RETURN TO NURSING. This instructional series was developed in 1967 for the State University of New York by Russell Sage College Department of Nursing and WMHT (Educational Television) in Schenectady. New Hampshire, a state of approximately 8,000 square miles, is uniquely equipped to reach virtually all the population via its five-station Educational Television Network. This televised refresher course, therefore, seemed to be a natural instructional instrument which could lend itself to many kinds of uses depending on the resources available in different areas throughout the State. It would serve not only as a helpful adjunct in a refresher course for inactive nurses, but could become a core for inservice educational programs in small hospitals, nursing and county homes, and a focus to initiate group discussions with allied health professionals from Public Health, social work, occupational and physical therapy and other such groups. The University of New Hampshire

Extension Service, through special projects to strengthen nursing services in small hospitals and nursing homes, has agreed to work in cooperation with this program. The two consultants of these projects, both registered nurses with masters degrees, will coordinate the implementation of the television program at the local institutions throughout the State. Both consultants already have been working closely in the developmental phase of this proposed program.

The implementation of this proposed program will get underway as soon as funds become available through negotiation of a sub-contract with the Bureau of Health Professions Education and Manpower Training, Division of Nursing.

The refreshing of inactive nurses could thus become an on-going integral part of the programs of in-service education for all nurses. With such an approach, a more efficient utilization of the existing health manpower (the real need in New Hampshire) would be achieved, with the end result of an increased quality of health care to the people of New Hampshire.

REFRESHER COURSES FOR REGISTERED NURSES

ADVISORY COMMITTEE

A six-member advisory committee of the New Hampshire Nurses' Association was formed. These members represented the fields of nursing education, nursing service, and public health and the Executive Director of the New Hampshire Nurses' Association. The committee met periodically for the purposes of being brought up to date as to the activities regarding refresher courses for registered nurses and to advise on future activities, such as recruitment and promotion.

IDENTIFICATION AND RETRAINING OF INACTIVE PROFESSIONAL NURSES

Since statistical data on registered licensed nurses in New Hampshire are recorded manually, it was decided early in the Project that it would be impractical to attempt to survey all inactive registered nurses in the State. Rather, efforts were made to determine the need, and then to recruit trainees on a local basis. Refresher courses were initiated in one of three general ways:

1) A facility or institution would register a request through the local Employment Security Office.
2) An institution with a need for more nursing personnel would contact the Project Coordinator who would then initiate procedures, with the cooperation of the Office of Employment Security, for recruiting inactive nurses and establishing a refresher course within the institution. Or a group of institutions in a given metropolitan area would indicate willingness to work cooperatively in establishing a refresher course in which they would all assist in recruiting trainees. Thus, all benefited from the additional personnel that were retrained.

3) Development of programs was also done on a statewide basis. The Health Occupations Consultant, New Hampshire Division of Vocational-Technical Education, and the Project Coordinator met to determine the need for refresher courses for the ensuing fiscal year and a proposal for twelve courses in the ten counties of New Hampshire was sent to the Chief of Vocational-Technical Education for submission to the CAMPS Committee. Recommendations for refresher courses for other health occupations were also included in this proposal (Occupational Therapy, Medical Technology, Physical Therapy and Licensed Practical Nurses).

It was intended that all these courses would be funded by MDTA. Letters from the respective hospitals requesting a need for additional registered nurses and requesting refresher courses were sent to the respective local Employment Security Offices, where interested trainees were interviewed and screened. (See Appendix A-1)

Prior to the Project the Health Occupations Consultant had written a curriculum outline which had been approved by the New Hampshire Nurses Association and the New Hampshire League for Nursing. This was made available to all who were interested, in addition to textbooks and other material supplied by the Division of Nursing, U. S. Department of Health, Education and Welfare.

Professional Nurse Alumni Groups -

In the Spring of 1969, an exploratory search was made to locate inactive nurses through local nurse alumni groups. (See Appendix A-2) The Coordinator visited three different kinds of alumni groups, selected to be representative of the fourteen groups known to exist in the State,

and conducted a brief survey. About 10% of those who attended were inactive due to reasons such as pregnancy or illness. One group, at an annual alumni banquet, had an unusually large percentage of inactive nurses (50%) who were retired from nursing because of advanced age or other very specific reasons. Groups that met for their regular scheduled meeting with a featured guest speaker were attended by a higher percentage of nurses who were actively involved with nursing, while groups that met for social reasons, such as a farewell dinner or annual banquet, had a much higher percentage of inactive nurses who were past retirement age. In addition to giving "advanced age" as a reason for being inactive, some of the responses were: raising a family, sick husband or elderly parent, employed in family business, married to an M. D., husband unwilling to have wife work, pregnancy, chronic illness. These nurses had been inactive on an average of fifteen years.

The over-all conclusion reached was that alumni groups were not productive centers for locating inactive nurses who would be interested in returning to nursing.

Nurses With Advanced Education Preparation -

In an attempt to locate qualified nurse instructors in the State, a letter was sent in the Spring of 1969 to fourteen colleges and universities requesting the names of graduates from their schools of nursing who were presently residing in New Hampshire. (See Appendix A-3) There was a good response, and a file of 255 names has been developed. While it did not fill any needs for the refresher courses, it was of value to persons engaged in developing a faculty for the first school in New Hampshire to offer an Associate Degree in Nursing program. This file will remain in

the office of the New Hampshire Health Careers Council as a resource for future reference.

NURSE REFRESHER COURSES HELD IN NEW HAMPSHIRE

INSTITUTION	NO. OF COURSES	NO. ENROLLED	NO. GRADUATED	EMPLOYED ON GRADUATION		STILL EMPLOYED	
				F.T.	P.T.	F.T.	P.T.
Hospital A	1	11	11	2	8	1	5
Hospital B	1	10	8	2	3	2	4
Hospital C	1	7	6	-	3	-	3
Hospital D	3	8	6	1	4	?	?
		12	12	2	5	1	?
		12	12	2	4	1	5
Hospital E	2	13	13	3	5	3	4
		6	5	-	4	-	2
Hospital F	1	11	11	3	7	2	7
TOTALS	9	90	84	14	43	10	30

SUMMARY OF FINDINGS OF SURVEY ON REGISTERED NURSE REFRESHER COURSES

In March, 1969, after the Inactive Health Personnel Project had participated in nine R. N. Refresher Courses held in six New Hampshire hospitals with varying results, it was felt that an in-depth study might prove helpful before planning future programs. Questionnaires were sent to all nurses who had enrolled in the refresher courses, and interviews were conducted with personnel in Employment Security and with nursing administrators and instructors in the hospitals where the courses were offered. (See Appendices A-4 and A-5)

SUMMARY OF QUESTIONNAIRE TO TRAINEES OF R.N. REFRESHER PROGRAMS

Based on 87 questionnaires distributed, 56 returned - (64%)

1. How did you learn about the course?

Newspapers	32	(57%)
Radio	9	(15%)
Health Careers Council	0	
Local Hospital	10	(18%)
Employment Security Office	15	(27%)
Other (friends, letters, etc.)	10	(18%)

2. Would you have taken this course if it had obligated you to employment afterward?

Yes	22	(39%)
No	20	(36%)
Undecided	14	(25%)

3. Do you know of other nurses in your area who would like to take a similar course?

Yes	13	(23%)
No	32	(57%)

4. What were your purposes for enrolling in the Refresher Course? Were these purposes realized?

Purposes:		Yes	No	Partly
To gain refresher knowledge in general	25 (45%)	24	1	3
To gain refresher knowledge in medications	6 (11%)	-	-	-
To gain refresher knowledge in procedures	8 (14%)	3	-	2
To gain confidence	17 (30%)	13	-	3
Financial reasons	3 (5%)	1	1	-
To return to hospital nursing	11 (20%)	8	1	3
Miscellaneous reasons	10 (19%)			
TOTALS		36	8	11

5. What kinds of work have you done since completing the course? Full or part-time? Did the course prepare you for the work?

Type of Work:	Full Time	Part Time	Yes	No	Partly
General Duty, hospital	1	27	16	-	11
General Duty, Nsg. Home	1	11	1	4	5
Private Duty	-	9	2	1	4
V.N.A.	-	3	-	-	3
Home Health Agency	-	2	-	-	-
O.R. Nursing	1	-	-	-	1
Industrial Nursing	-	2	-	-	2
School Nurse	-	2	1	-	1
Camp Nurse	1	-	-	-	1
Volunteer, Blood Bank	1	-	1	-	-
Doctor's Office	1	-	-	1	-
Has not worked	4				
TOTALS	60	6	21	6	28

6. Comments and suggestions:

Concerning scheduling and content of course:

1) Course took too much time away from home. Suggest 4-day week or evenings.
2) Evening course for a longer span of time with shorter sessions.
3) Sessions should be shorter in length (1-2 hours).
4) Courses should be offered periodically.
5) Extend length of course and eliminate homework involved.
6) Course should be given during school year, not summertime.
7) Offer choice of longer participation in specific areas of needed refreshing.
8) Course should be longer.
9) Interviewing of applicants should be done by hospital personnel.

Concerning publicity:

1) Hospitals should have more publicity and information concerning course.
2) All nurses who are currently registered should be contacted. (4)
3) All nurses who are currently registered and in the 40-60 age level should be contacted.
4) Send questionnaires when nurses reply to their R. N. Registration as inactive.
5) More newspaper coverage. (2)
6) More newspaper coverage without stressing obligation to work.
7) Newspaper coverage most important publicity.
8) More advance publicity needed.

Concerning employment:

1) There should be assurance from the hospitals that (part-time) work will be available to those who have taken the course. (2)
2) Course should be required for all nurses returning to work after 3 years away. (After 5 years away.)

It was felt by those in Employment Security that the potential nurse manpower in the inactive nurse reservoir had been grossly overestimated. Response to promotion of the courses was so limited that half a dozen programs were cancelled due to lack of applicants, while those that were held ranged in enrollment from six to thirteen with an average of 9.5 per class.

Many of the nurse administrators and instructors felt that the role of Employment Security in promoting and screening applicants, and delays due to "red tape" procedures, were factors that contributed to the small number that enrolled. The absence of established criteria, the sub-standard quality of some applicants, confusing and excessive paper work and poor communications in general were also given as problems encountered in many areas.

The percentage of return to active employment following the course discouraged many hospitals from attempting further classes. Some explanation for this was demonstrated in the responses to the questionnaires returned by nurses who had taken the refresher courses. There seemed to be a marked discrepancy between the reasons why nurses enrolled in refresher courses and the realistic and acute nursing needs of the hospitals:

Refresher's Reason for Enrolling	Hospital Nurse Needs
1) Update nursing knowledge and skills for own information.	1) Well-trained nurses to strengthen nursing staff and provide patient care.
2) Desire part-time employment during daytime hours (9-2) while children are at school	2) Nursing shortage on evenings 3-11 and nights 11-7.
3) To perform basic nursing at bedside.	3) Need for team leaders, charge nurses, etc. for supervision and administration.

The results of these conflicts were well demonstrated in the low number of trainees that became employed by the hospitals after completion of the course. Hospitals that were flexible in their employment policies and use of personnel had the highest percentage of return, while those that had rigid policies regarding compulsory week-end or evening and night duty, and had little or no employment for the part-time nurses had the smallest percentage of refresher trainees employed.

PLANS FOR FUTURE REFRESHER COURSES

Maximum use of these findings was made in the planning for fall courses in two New Hampshire hospitals, i.e., changes in course promotion, the screening of applicants, and care taken from the start to emphasize the hospital's nursing needs and professional responsibilities of both the employer and the employee in adapting to meet emergency nursing needs. (See Appendix A-6 and A-7) These plans, however, did not materialize. In one hospital, due to a shortage of classroom space while the hospital was undergoing an extensive rebuilding program, the decision was made to limit the enrollment to only those R. N.'s who would commit themselves to working for the hospital following completion of the course. They also revised the course content to suit their needs. The second hospital, after a summer of indecision while the Coordinator worked to identify a group of nine interested inactive nurses, decided one month before the completion of the Project that it would not be a suitable time for them to have a refresher course. Neighboring hospitals were contacted in the hope that the course could be moved to their facilities, but there were no instructors available in either community.

Near the end of the Project period, evaluated findings resulted in a

recommendation by the Project Director and Coordinator which would demonstrate a more effective approach to refresher training for nurses in New Hampshire. It has been recommended that a planned program utilizing educational television be made available to nurses in New Hampshire desiring refresher training. It has become evident that in New Hampshire, the need for nurse refresher courses exists in:

1) small groups of 3-9 persons,
2) persons residing in scattered parts of the State, particularly in rural areas, and
3) areas where there are no qualified instructors available.

Taking these facts into consideration, and after much deliberation and exploring, it was felt that a suitable TV series would solve many of the problems encountered by the Project in nurse refresher training.

A refresher course especially designed to help inactive registered nurses return to their profession, Return to Nursing, has been developed by the Department of Nursing at Russell Sage College, Troy, New York and produced by the State University of New York. The series is available on loan for showing in New Hampshire.

The key objective of Return to Nursing is to provide a planned program of theory and related clinical practice through which the returning nurse may gain further confidence in carrying out her decision to resume an active role in the practice of nursing. It will provide her the opportunities to:

1) review knowledge and procedures which she has learned in the past,
2) learn new concepts and skills related to the practice of contemporary nursing, and

3) increase her knowledge of the changing role of the nurse as a member of the health team.

It is the hope of the Director and Coordinator that this televised series will also be utilized by practicing R. N.'s to refresh or up-date them with the newer role requirements.

A survey of 178 hospitals, county homes, nursing homes and public health agencies was conducted in October, 1969, to determine the extent of interest and resources available to implement this program. (See Appendices A-8 and A-9) The response indicated a great deal of interest and willingness to participate. A number of institutions in divergent areas of the State offered their clinical facilities for refresher programs for inactive nurses, and an overwhelming number of institutions indicated interest in the series for use as a refresher program of inservice education for staff nurses.

An agreement has been made with the New Hampshire Public Television Network (EDT) in Durham, New Hampshire, that, if implemented, the series, Return to Nursing, will begin in February, 1970. One 30-minute lesson will be shown each week at a regularly scheduled time, and repeated again the same evening, for 15 consecutive weeks. Early in January a procedure for applying and enrolling in the course will be advertised statewide through the news media and cooperating Nurses Associations and other health organizations and agencies. Institutions where courses are to be conducted will be announced, and qualified instructors or discussion leaders will be appointed in each facility. The refresher courses will be conducted wherever there are nurses interested in returning to nursing and there is an institution willing to provide the necessary clinical experience and super-

vision. Records will be kept to demonstrate the students' progress during the phases of related theory and clinical experience and conferences held at frequent and regular intervals. The scheduling and duration of clinical experience will be determined by the individual programs and the abilities of the trainees involved. It will be recommended that a minimum of 80 hours of clinical experience should be given within a concentrated period of two or three weeks at the conclusion of the TV series.

At the conclusion of the series in mid-May of 1970 an evaluation of the series will be conducted with all who were involved in the courses: enrollees, instructors, supervisors and administrators of the participating institutions. These findings will be compiled and summarized.

The future of this proposed plan for refresher training depends on whether the Bureau of Health Professions Education and Manpower Training will consider extending the Project on a sub-contract basis. A proposal for said contract has been submitted for consideration.

SUMMARY OF QUESTIONNAIRE SENT TO ADMINISTRATORS AND DIRECTORS OF NURSING IN HOSPITALS, NURSING HOMES, COUNTY HOMES AND OTHER HEALTH AGENCIES REGARDING PROPOSED TELEVISED COURSE FOR REGISTERED NURSES IN NEW HAMPSHIRE

QUESTION	HOSPITALS		CTY. HOMES NSG. HOMES		PUBLIC HEALTH	
	Yes	No	Yes	No	Yes	No
1. Do you get good TV reception of Channel 11 (15,40,49,52) in your institution or agency?	12	8	20	15	15	7
2. Are you interested in considering this series for In-service Program	18	1	24	10	15	5
3. Do you have a nurse on your staff who could lead follow-up discussions?	16	2	24	7	8	5
4. Could she attend a workshop to prepare for this role?	18	1	18	9	8	5
5. Do you have an appropriate room to use for this program?	16	1	20	13	3	9
6. Would you welcome R.N.'s from small nursing homes to join your group?	18	1	23	4	6	6
7. Are you interested in considering this series for a Refresher Course	8	9	19	11	4	8
8. Could you provide the necessary clinical experience for refresher nurses?	9	5	7	19	2	9
9. Do you have access to the following reference materials? 1) American Journal of Nursing	19	0	25	11	14	8
2) R. N.	16	3	23	12	12	9
3) Modern Hospital	18	1	22	15	-	-
4) Hospital Management	19	0	18	17	-	-
10. If you are in a small agency (1 or 2 nurses), would you be interested in: 1) Joining with another group in your area?	-	-	-	-	10	-
2) Taking the course on your own?	-	-	-	-	12	-

Summary based on replies from:
20 hospitals (out of 32)
41 nursing homes and county homes (out of 92)
29 Public Health agencies (out of 54)

SURVEY OF LICENSED PRACTICAL NURSES

Early in the summer of 1969, a group of highly motivated practical nurses who were licensed in New Hampshire by waiver, contacted the Project Coordinator to explore the possibility of establishing an accelerated, state approved, six-month program, similar to the program that had been established and was functioning so successfully in Chelsea, Massachusetts.

In 1965, when the Mandatory Licensure Law was passed for practical nurses in New Hampshire, there were 857 practical nurses granted licenses by waiver of:

1) examination
2) diploma from an approved school

In December of 1965 and again in 1966 about 175 of these nurses took and passed the New Hampshire State Board Examination for L.P.N. - but, because they were not graduates of an approved school, their licenses were again granted "by waiver". This license, while fully recognized within the State, has two drawbacks: it is not valid outside the State, and Federal Law prohibits nurses from functioning as charge nurses in V. A. hospitals or Medicare Approved Extended Care Facilities unless they are licensed and graduates of an approved school of nursing.

For these reasons, as well as the salary differential that affected waivered L.P.N.'s employed in most institutions, the nurses were anxious to take an accelerated course that would, as they expressed it, remove the "stigma" of the waivered clause and qualify them for full licensure.

It was decided that a careful survey should be made to determine just how many waivered L.P.N.'s were really interested and would be able to enroll in such a course of study. With the cooperation of the Licensed Practical

Nurses Association of New Hampshire, questionnaires together with a letter of explanation, were mailed to all the registered practical nurses with a waivered license in New Hampshire who were under the age of 70. (See Appendix B-1) There were about 500 such nurses, considerable fewer than the approximately 10,000 in Massachusetts. Of the 493 questionnaires sent out, 121 (about 25%) were returned. (See Appendix B-2) Sixty-one of these stated that they were either unable, disinterested, or "too old" to take the course, and about 18 were undecided. Only 8 of the 42 nurses who expressed interest in the course were free to stop work and leave home in order to attend school full time for the minimum 6 months that the accelerated course would require. Those who had to stay at home and continue working were located in the following areas:

Manchester	10	Concord	3
Claremont	8	Laconia	2
Portsmouth	6	Keene	2
Nashua	3	TOTAL	34

On the basis of these findings it was obvious that there was not enough interest expressed to warrant the time and expense required to plan, accredit and finance a new training program. It was then decided to explore the feasibility of encouraging those who were interested and qualified, to enroll in existing programs for practical nurses (located in Claremont, Berlin, Portsmouth, Nashua and Grasmere) with programs adjusted if possible to their needs and deficiencies on an individualized basis.

A second questionnaire was sent to the 42 nurses who expressed interest in the course to determine if they had a high school diploma (or equivalency certificate) and, if they were compelled to work, what the minimum number of hours per week would be. (See Appendix B-3) Of the 42 questionnaires

sent out, only 23 responded. Five of the original eight who were free to stop work and leave home were still interested and qualified to enroll in an approved school. Of the remaining 18, eleven had to be eliminated because they either did not have a high school diploma or had to work 32 to 40 hours per week. The seven who qualified had high school diplomas, needed to work only 24 hours per week, and lived within easy distance of the Portsmouth, Manchester and Claremont schools. These twelve nurses were contacted and advised on an individual basis regarding the best way to achieve their goal.

SURVEY OF DENTISTS AND DENTAL AUXILIARY PERSONNEL

INTRODUCTION

A six-member advisory committee representing the N. H. Dental Society, the N. H. Dental Hygienists Association and the N. H. Dental Assistants Association was formed for the following purposes:

1) To determine the current needs of the dentists in New Hampshire for auxiliary personnel.
2) To determine the employment status of the dental auxiliary personnel.
3) To identify those inactive personnel who would be interested in returning to employment.
4) To determine if refresher courses would be needed.

The Advisory Committee met for the first time in February, 1968. At this meeting the above objectives were accepted. It was decided that the first step in the attainment of these objectives would be to conduct a survey of dentists to determine their needs and a survey of dental hygienists to determine their status of employment.

The list of the dentists and dental hygienists was obtained from the Directory of Dentists and Hygienists issued by the State of New Hampshire Dental Board. The Dental Board also made available the file of those dental hygienists who had let their registration lapse.

SURVEY OF DENTISTS

A questionnaire form was constructed to determine the type and number of auxiliary personnel currently employed and the current vacancies in the three auxiliary categories (dental assistants, dental hygienists, dental technicians). For the convenience of the dentists the questionnaire was

sent out on a business reply card together with a letter of explanation. (See Appendix C-1)

RESULTS OF SURVEY OF DENTISTS

The findings presented are based on data from 236 questionnaires returned (80%). The following table shows the results by counties:

COUNTY	# DENTISTS RESPONDING	# AUX. PERSONNEL EMPLOYED			# AUX. PERSONNEL NEEDED		
		DENTAL ASSIS'T	DENTAL HYGIEN'T	DENTAL LAB TECHNICIAN	DENTAL ASSIS'T	DENTAL HYGIEN'T	DENTAL LAB TECHNICIAN
Belknap	12	10	4	0	0	2	0
Carroll	7	4	1	0	3	2	0
Cheshire	13	13	5	0	0	8	0
Coos	7	8	1	0	1	3	0
Grafton	18	12	4	1	5	5	1
Hillsborough	72	62	25	6	14	23	5
Merrimack	33	32	18	2	5	13	2
Rockingham	33	33	16	0	6	14	1
Strafford	21	19	9	2	2	6	2
Sullivan	13	11	7	0	2	1	0
No Name/ Address	6	4	2	0	1	2	0
TOTALS	236	208	92	11	39	79	11

SURVEY OF DENTAL HYGIENISTS

This survey was conducted to determine the current employment status, reasons for unemployment, future work plans and interest in a refresher course. A questionnaire was constructed in the simplest and shortest form in the hope of assuring a high percentage of return. (See Appendix C-2)

RESULTS OF SURVEY OF DENTAL HYGIENISTS

Of the 199 surveys sent out, 166 (83%) were returned. Of the 166 returned, 88 (53%) responded that they were currently employed. Forty-three (26%) were not employed. Thirty-four (79%) of those unemployed indicated interest in returning at some date. The following table shows the number of dental hygienists who plan to return to work according to the year they expect to return and their intention to work on a full or part-time basis. Nine (21%) expressed no interest in returning.

YEAR OF RETURN	TOTAL DENTAL HYGIENISTS	INTENDED BASIS OF EMPLOYMENT		
		FULL-TIME	PART-TIME	NO RESPONSE
1968	10	3	5	2
1969	5		2	3
1970	0			
1971	2		2	
11972	2		1	1
After 1972	3			3
Uncertain	12		5	7
TOTALS	34	3	15	16

The following shows the reasons for unemployment in dental hygiene among those hygienists interested in returning to active employment:

Family responsibility	21
Low salary	1
Other	7
No response	5

DENTAL HYGIENISTS INTERESTED IN A REFRESHER COURSE

One of the main objectives of the project was to promote refresher courses for inactive personnel so as to help develop skills, knowledge and self-confidence necessary for their return to active practice. Another analysis of the returns from those feeling that they would need a refresher course was made. Of the 34 dental hygienists indicating an interest in returning to employment, 7 responded that they would need a refresher course prior to their return. The table below shows the relationship between the year of return and the indication of need for a refresher course.

YEAR OF RETURN	NUMBER INTERESTED IN REFRESHER COURSE
1968	1
1969	2
1971	1
1980	1
No date given	2
TOTAL	7

Due to the small number of dental hygienists indicating a need for a refresher course, a wide range of the year of return, and geographical distribution, the Advisory Committee decided that a refresher course was not indicated at that time. Rather, refresher training would have to be done on an individual basis by the dentist employing a dental hygienist needing refresher training.

Exchange of Referral Lists Between Inactive Hygienists and Dentists Needing Hygienists

Letters giving the names and addresses of dental hygienists interested in returning to employment were sent to the dentists indicating a need for a

hygienist. (See Appendix C-3) The dentists were advised to contact the dental hygienists if they so wished. In turn, letters giving the names and addresses of the dentists looking for a hygienist were sent to the dental hygienists indicating an interest in returning to employment. (See Appendix C-4) Names given to the dental hygienists and dentists were grouped on a county basis.

Evaluation of Results of Exchange of Referral Lists Between Dentists and Dental Hygienists

In September, 1968 a survey questionnaire was sent to the inactive dental hygienists to determine the effectiveness of the exchange of referral lists between dentists and dental hygienists. Nineteen questionnaires were sent out with fourteen responding as follows:

	YES	NO	MAYBE
1. Were you contacted by a dentist?	11	3	-
2. Are you presently employed?	4	10	-
a. If yes, is it full or part-time?	4 part-time		
b. If no, do you plan to return by 1970?	1	4	3

Comments:

"Survey served its purpose - it was a good idea"

"I only wanted work with public school programs and got calls for private practice"

"Fall of 1969 is now earliest I can return to work"

"I got calls only from my county - would like names of dentists near home (Live on border of a county)"

"Will return to N. H. in February 1969 and would like help then"

Members of the Advisory Committee felt that communication within each

group and between the two professional groups had been greatly strengthened. Also, statistics on the need for dental hygienists were used to further document the great need for the establishment of the first school of dental hygiene in New Hampshire.

Follow-up Contact of Inactive Dental Hygienists

In 1969 periodic telephone contacts were made with the half-dozen hygienists who had been identified by the 1968 survey as being interested in returning to their profession. It was found that four had returned to part-time employment, which was all they were able to do, while the others had changed their minds about returning to work. Two had evidently moved from the State, as their phones were disconnected and letters were not answered.

SURVEY OF DENTAL ASSISTANTS

Based on the need for dental assistants as shown in the results of the survey of dentists, the Advisory Committee decided that a survey of dental assistants should be conducted.

As licensure is not required for dental assistants to practice, there was a problem in compiling a list of dental assistants to be surveyed. Names were obtained from the New Hampshire Dental Assistants Association membership lists for the past few years, and from names obtained by asking the dental assistants being surveyed to give the names and addresses of any inactive dental assistants they might know.

A questionnaire (See Appendix C-5) was designed to meet the following purposes:

1) To identify those dental assistants who are employed and

those who are inactive.

2) To identify among the inactive those who would be interested in returning to active employment, and to determine if a refresher course would be needed.

RESULTS OF SURVEY OF DENTAL ASSISTANTS

Of the 147 questionnaires sent, 111 (76%) were returned. Fifty-five (50%) of the total returned were currently employed and 35 (32%) were unemployed. Twenty-nine of those unemployed (83%) expressed an interest in returning at some date, and 6 (17%) expressed no interest in returning. The following table shows the date of return and their intention to work full or part-time upon returning.

YEAR OF RETURN	TOTAL DENTAL ASSISTANTS	INTENDED BASIS OF EMPLOYMENT		NO RESPONSE
		FULL-TIME	PART-TIME	
1968	10	4	6	-
1969	4	2	2	-
1970	5	4	1	-
1971	2	0	1	1
1972	0	0	0	0
After 1972	3	1	2	0
Date Uncertain	2	2	0	-
No Date Given	3	-	1	2
TOTALS	29	13	13	3

The following shows the reasons for unemployment among dental assistants interested in returning.

Family responsibility	17	Other	8
Low salary	3	No response	4

Interest in a Refresher Course

Among the 29 dental assistants who were interested in returning to active employment, 13 indicated an interest in a refresher course. The following chart shows the relationship of interested assistants and the expected year of return:

YEAR OF RETURN	INTERESTED ASSISTANTS
1968	3
1969	3
1970	2
1971	2
After 1972	1
No date given	1
Uncertain	1

Follow-Up Evaluation of Results of Exchange of Referral Lists Between Dental Assistants and Dentists

In September, letters giving the names and addresses of the dentists in the State looking for a dental assistant were sent to the dental assistants indicating an interest in returning to employment. (See Appendix C-6) Due to the absence of a Coordinator, the follow-up evaluation was not conducted until the following May, almost eight months after the initial survey and exchange of names with dentists looking for dental assistants. Fourteen questionnaires were mailed out with only 6 returned. (See Appendix C-7) A second mailing was sent to those who did not respond, but with no results. The following is a summarization of this response.

	YES	NO	UNDECIDED
1) Were you contacted by a dentist?	1	5	
2) Are you presently employed?	1	5	
a) If yes, full or part-time?	-	1 part-time	
b) If no, do you plan to return by 1970?	1	3	2

CONCLUSION OF SURVEY OF DENTAL AUXILIARY PERSONNEL

It was decided by all concerned that the needs for refresher training of returning dental hygienists and dental assistants were so few and scattered geographically, as well as in time (year that the individual planned to return), that on-the-job refresher training was the only practical form of program to consider. It was also agreed that programs of continuing education for both dental hygienists and dental assistants were most worthwhile, as the Workshop held during a week-end in the Spring of 1969 amply demonstrated. As the Project terminates, the responsibility for programs to assist the returning hygienist or assistant becomes the concern, as is the responsibility for in-service education, of the respective State professional associations. When the first School for Dental Hygienists in New Hampshire opens in 1970, hopefully a more permanent method of refresher or continuing education will be developed within the program for the returning dental hygienist or dental assistant.

SURVEY OF MEDICAL TECHNOLOGISTS IN NEW HAMPSHIRE

INTRODUCTION

A four-member committee, one member representing the New Hampshire Society of Pathologists and three representing the New Hampshire Society of Medical Technologists, was formed for the following purposes:

1) To determine the employment status of medical technologists in New Hampshire.
2) To identify among the inactive medical technologists those who would be interested in returning to active employment.
3) To determine if a refresher course is indicated.
4) To determine the need for medical technologists.

METHODOLOGY

The list of medical technologists in the State was obtained from the National ASCP Registry. A questionnaire (See Appendix D-1) was developed to determine current employment status, future work plans, and interest in a refresher course. In a section of the questionnaire, the respondents were asked to list any inactive medical technologists known to them. The questionnaire was mailed out in July, 1968, and a second mailing was sent out to those who did not respond to the first. Additional names were obtained from the returns, and questionnaires were mailed to them.

RESULTS OF QUESTIONNAIRE SURVEY OF MEDICAL TECHNOLOGISTS

Of the 195 questionnaires mailed, a total of 164 (84%) were returned. Of the 164 returned, 7 were returned by the post office, 2 were unsigned, 7 were returned by persons residing out of state, and 4 were not usable. Seventy-six (46%) technologists were employed and 68 (42%) were not. Of the 68 who were not employed, 59 (87%) indicated an interest in returning to medical technology at some date.

The following table shows the expected year of return and the intention to work on a full or part-time basis upon return:

YEAR OF RETURN	NUMBER OF TECHNOLOGISTS	INTENDED BASIS OF EMPLOYMENT		
		FULL TIME	PART TIME	NO RESPONSE
1968	20	1	10	9
1969	5	0	3	2
1970	5	0	4	1
1971	3	0	2	1
1972	14	0	4	10
No Date Given	7	0	3	4
TOTALS	59	1	27	31

Following are the reasons given for not presently being employed among those indicating an interest in returning to active practice:

Family responsibilities	44	Low salary	9
Lack of interest	2	Been away too long	9
Physically unable	1	Other	11

Interest in Refresher Course

Those inactive medical technologists who indicated an interest in returning to active practice were asked if they would need a refresher course prior to their return. The following indicates their interest:

YEAR OF RETURN	NUMBER SURVEYED	NUMBER REQUESTING REFRESHER COURSE	UNCERTAIN
1968	20	9	3
1969	5	1	2
1970	5	3	2
1971	3	2	0
1972	5	1	0
After 1972	14	5	2
No date given	7	4	0
TOTALS	59	25	9

FOLLOW-UP

Upon evaluation of the results of the surveys, the Advisory Committee decided that two types of follow-up surveys should be done in order to obtain further information:

1) Interview should be held with all of the inactive medical technologists who have indicated interest in returning to active practice to gather the following information:
   a) To determine the true intent in regard to returning to active employment;
   b) to learn more about their past job experience and length of time since last employed, so as to assist in determining the type of refresher course needed;
   c) to determine the type of work schedule (number of hours per day and days per week) the inactive medical technologists could accept;
   d) upon completion of the interview, the interviewer should ascertain the type of refresher course that each individual would need. (See Appendix D-2)

EVALUATION OF SURVEY

Sixteen of the 25 inactive Medical Technologists who expressed an interest in returning to work were intereviewed by medical technologists who were members of the Advisory Board. The other nine had either moved or were away from home. Of these sixteen, 3 said they were <u>not</u> interested in working again, while 4 said they would like to start full-time work under certain conditions: two wanted refresher courses first, one wanted a refresher course in another year, and the fourth had started refresher on-the-job training but had had to retire because of ill health. The

remaining nine wanted to return on a part-time basis. Three had been unable to find the kind of part-time employment they wanted in their community. Three wanted refresher training before starting, and three mentioned the low salaries ($85.00/week) as factors that discouraged them from working.

The requests for refresher programs were few and persons requesting them were scattered geographically and also in respect to dates when they could attend such courses. It was felt that individuals who wanted to return should contact a laboratory that had a vacancy and then receive on-the-job training for the specific position they were to fill. It was also mentioned several times that the pay scale for medical technologists in New Hampshire (which are the lowest in the country) was a real deterrant to attracting additional workers.

SURVEY OF OCCUPATIONAL THERAPISTS

INTRODUCTION

A four-member advisory committee, representing the New Hampshire section of the Northern New England Occupational Therapy Association was formed to assist in accomplishing the following goals:

1) To survey all known occupational therapists to determine their status of employment.
2) To determine the amount of interest in returning to active employment among the inactive occupational therapists.
3) To determine if a refresher course is indicated.
4) To determine the need for occupational therapists in New Hampshire.

METHODOLOGY

The list of names and addresses of registered occupational therapists in New Hampshire was obtained from the national registry. A questionnaire (see Appendix E-1) was developed to determine current employment status, reasons for unemployment, future work plans and interest in a refresher course.

RESULTS OF QUESTIONNAIRE

Of the 63 questionnaires mailed, 53 (84%) were returned. Twenty-one (40%) of the respondents indicated that they were currently employed, and 28 (53%) were unemployed. Of the 28 not employed, 26 indicated interest in returning at some date. The following table shows the relationship between year of return, and basis of employment upon return:

EXPECTED YEAR OF RETURN	TOTAL O.T.'s	INTENDED BASIS OF EMPLOYMENT		
		FULL TIME	PART TIME	NO RESPONSE
1968	7	-	6	1
1969	1	-	1	-
1970	1	-	1	-
1971	3	-	3	-
1972	2	-	2	-
After 1972	9	-	1	8
Uncertain	3	-	2	1
TOTALS	26	-	16	10

The following are the reasons for presently being unemployed among those interested in returning:

Family responsibility	24	Low salary	3
Lack of interest	1	Been away too long	5
Physically unable	1	Other	6

Interest in Refresher Course

The following table shows the interest in a refresher course according to the expected year of return to employment:

EXPECTED YEAR OF RETURN	OCCUPATIONAL THERAPISTS INDICATING A NEED FOR A REFRESHER COURSE		
	YES	NO	UNCERTAIN
1968	4	1	2
1969	1	-	-
1970	-	-	1
1971	2	1	-
1972	1	-	1
After 1972	2	2	1
Uncertain	-	-	2
TOTALS	10	4	7

CONCLUSIONS

With limited and scattered evidence of interest or need for a refresher course for Occupational Therapists, it was decided that it would not be feasible to give it further consideration at this time.

SURVEY OF DIETITIANS

In the spring of 1969 it came to our attention that there was a need for dietitians in about seven of the hospitals in New Hampshire. A list of these hospitals and the names of the person to be contacted in each institution was sent to about twenty dietitians who were believed to be available, at least on a part-time basis. (See Appendix F-1) The dietitians' names were supplied by the New Hampshire Public Health Nutritionist who knew the needs of the State well and was personally acquainted with all the members of the New Hampshire Dietetic Association. In the fall, a follow-up questionnaire was sent to the institutions to determine if their needs had been met. (See Appendix F-2) Five of the seven institutions responded.

RESULTS OF QUESTIONNAIRE TO HOSPITALS IN NEED OF A DIETITIAN

	Yes	No
1. We were contacted by a dietitian.	1	4
2. The vacancy was filled.	*	3
3. The vacancy was partially filled.	1	3
4. The vacancy still exists.	3	1

* Dietitian provided by contracting with a Food Service firm.

Comments:

"We would like to have weekends taken care of; dietitians do not seem available on weekends"

"We have not been aware of this offer; perhaps the list was not seen by the interested party"

"No results yet"

"Need a dietitians, even on a consulting basis"

"Recently an ADA Dietitian who had moved to New Hampshire

contacted the New Hampshire Hospital Association for employment and was told they knew of no vacancies. She found employment through personal ties later"

As it became apparant that the effort to supply the hospitals with the needed dietitians had not been successful, a questionnaire was sent to the dietitians in order to discover the reason for the lack of response. (See Appendix F-3) Nine of the 19 dietitians in the survey responded to our questionnaire.

RESULTS OF QUESTIONNAIRE TO DIETITIANS

As a result of the New Hampshire Health Careers Council's efforts:

	Yes	No
You contacted one of the institutions listed.	1	9

Reason:

Four stated they were already employed and therefore were not able to take on another job - even part-time.

Two said the hospitals listed were too far away.

Two said they were not looking for employment.

One had already contacted these hospitals and was consultant to three at that time.

Comments:

One sent the list to a sister-in-law (Registered ADA) in Massachusetts. She had friends interested in locating in New Hampshire.

"A needed service both to institutions and to public"

"If there were hospitals needing part-time consultant services within 30 miles of home, I would be interested"

"...Your service must be a real benefit to many"

A copy of the study and a list of the institutions still looking for dietitians was sent to the President of the New Hampshire Dietetic Association for further efforts to fill the state-wide need.

SURVEY OF SOCIAL WORKERS

During the first year of the Project the Coordinator contacted the President of the New Hampshire Chapter of the National Association of Social Workers who informed her that all inactive social workers were known and had been contacted by the Chapter. Therefore, no survey was conducted at that time.

In the late summer of 1969 it was brought to our attention that there was a growing and urgent need for qualified medical-social workers to develop and establish social services in Extended Care Facilities and Nursing Homes throughout the State. It was felt by several influential medical social workers that there might be more than a few social workers who had moved into the State and were unknown and unemployed. In an attempt to locate them, a request for the names of social workers was made first to the National Association, who referred us to the State organization. Since the State Chapter of NASW did not have an up-to-date list available, it was decided to contact the professional schools to request the names of their graduates who were presently residing in New Hampshire. Letters were sent to 28 colleges and universities, with responses from 18. (See Appendix G-1) A total of 82 names were submitted. Since, by that time, the Project had terminated, the list of names was turned over to the President of the New Hampshire Association of Social Workers and those concerned with locating more fully qualified personnel. The list will be checked against the list of members of the State Chapter to identify hither-to-unkown inactive social workers in New Hampshire.

ADDITIONAL ACTIVITIES

INTRODUCTION

This section will describe several other activities which are brief in description but are, nonetheless, of importance and influence to this project. These activities fall into two main categories:

1) contacts with other health professional associations, and
2) the Health Manpower Data.

CONTACTS WITH OTHER HEALTH PROFESSIONAL ASSOCIATIONS

The Coordinator has met with representatives of the following health professional associations:

N. H. Chapter, American Physical Therapy Association

The Coordinator met with the newly elected President. A refresher course was conducted by the Association a year or two ago. The President felt that, because of the lack of success of this program, the Association might be hesitant about being involved in a similar program. He also indicated the Association was being reorganized. He did agree to discuss this project with his Board. In a follow-up telephone conversation with the President, he stated the Association, because of its present reorganization activities, could not become involved in refresher training for another year at least.

N. H. Medical Assistants Association

A meeting was held with President of the Association. This is an extremely small group with a membership of about seven. The first formal educational program in the State to prepare certified medical assistants was started in the fall of 1968; thus, up to this time, medical assistants received their training on the job, and job qualifications and responsibilities

varied greatly. Refresher training, therefore, would be most difficult due to the fact that medical assistants are neither registered or licensed. The President of the Association talked to her Board and to some physicians about this Project, but no decisions were made.

N. H. Society of Radiologic Technologists

The Coordinator met with the President of the Society who was very interested in looking into the possibility of reactivating inactive radiologic technologists. Upon consulting with the President of the New Hampshire Chapter, American College of Radiology, the President of the Society stated that due to formerly established priorities, it would be best to wait one year before becoming involved in this Project. On contacting the President again in the spring of 1969, he stated that their situation was essentially unchanged.

N. H. Speech and Hearing Association

The Coordinator talked with the President of the Association who stated that any known inactive therapists had been contacted by the Association, so that she did not feel that there would be any advantage in pursuing this Project further.

N. H. Association of Medical Record Librarians

The Coordinator met with the President of the Association. There are six actively registered Medical Record Librarians in the State, five of whom are employed. There are three inactive R. R. L.'s. The National Association has a correspondence course for inactive R. R. L.'s. With the small number concerned, it therefore appears that the individual-type of refresher training would be more practical than a statewide program.

The major problem with the reactivation of inactive R. R. L.'s would be the one of identifying them. It was felt that the best way to identify these inactive personnel was to contact those R. R. L.'s currently employed in medical record departments. Accordingly, a survey form along with a cover letter requesting assistance was designed and printed. (See Appendix H-1) The President distributed these at a tri-state meeting. Because of the small number of names obtained from this survey, no further plans were made.

HEALTH MANPOWER DATA

To identify employment opportunities and needs in a broad number of health personnel categories throughout the State, the Project has cooperated with the New Hampshire Hospital Association, the New Hampshire Chapter, American Cancer Society, and the New Hampshire Health Careers Council. This study data reflects employment needs on a county, regional and state basis; and assists in identifying inactive health personnel in specific areas.

REFLECTIONS AND PROBLEMS ENCOUNTERED

At the end of the first year of the Project, while it was felt that much had been accomplished in the way of gathering information and establishing communications between groups, there were numerous problems encountered in conducting the refresher courses. These problems seemed to originate largely due to lack of funds for conducting the courses and insufficient time from the date of the funding to the date the course had to commence.

When the Project was reactivated on March 17, 1969, after a period of six months of minimal activity due to the difficulty in obtaining a replacement for Coordinator of the Project, it had to start with not only a program that was virtually at a standstill, but also had to cope with residual problems and confusion resulting from an interval of two months when an aborted attempt was made to activate the Project.

Also, fundamental problems that lie outside the scope of this Project severely hampered its success. Inadequate salaries, inappropriate benefits, and frustrating working conditions force many to find employment outside the health professions. The critical need for trained health personnel exists, but is not recognized by many doctors and administrators, and above all, New Hampshire State Legislators, who are so influential in decisions related to funding health and welfare programs.

APPENDIX INDEX

		Page
APPENDIX A	Refresher Courses for Registered Nurses	47
APPENDIX B	Survey of Licensed Practical Nurses	62
APPENDIX C	Survey of Dentists and Dental Auxiliary Personnel	68
APPENDIX D	Survey of Medical Technologists	79
APPENDIX E	Survey of Occupational Therapists	82
APPENDIX F	Survey of Dietitians	85
APPENDIX G	Survey of Social Workers	90
APPENDIX H	Additional Activities	91

GUIDE OUTLINE FOR INTERVIEW OF PROSPECTIVE REFRESHER COURSE TRAINEES

I WORK HISTORY
1. Previous nursing employment
2. Length of employment
3. Reasons for leaving
4. Currently licensed in N. H.

II CURRENT PLANS FOR RETURNING TO NURSING
1. Specific plans or openings known to trainee
2. Full or part-time
3. Number of hours per week
4. Days of the week
5. Preferred shift
6. Weekend duty, if part-time at hospital - must work one weekend (Sat. or Sun.) a month

III FAMILY SITUATION - Home responsibilities and arrangements
1. Financial status (working for money or personal gratification)
2. Number of children
   a. Ages
3. Other dependents
4. Baby sitter problems?
5. Travel problems?
   a. Distance
   b. Form of transportation

IV ABILITY TO PERFORM NURSING
1. Physical Status
   a. Any recent illness, surgery, injury, handicaps that might effect ability to work
   b. Any problems with weight, back or feet
   c. Energy adequate?
   d. Any problems with vision or hearing
   e. Date of last physical
   f. Personal physician's name
2. Mental Status
   a. Alert?
   b. Good memory?
3. Emotional Status
   a. Real reason for returning to nursing.....LISTEN carefully (neurotic reason, financial necessity, etc.)
   b. Emotional stability....mannerisms, general appearance
   c. History of "nervous breakdown", alcoholism, drug problems, etc.

V REFERENCES (No relatives)
(Last employer, another nurse who could supply an honest, confidential character reference, family doctor or lawyer)

	NAME	ADDRESS	RELATIONSHIP
1			
2			
3			

SELF-EVALUATION GUIDE
(Skill Inventory)

Name _____

Date of graduation from school of nursing _____

Length of time inactive in nursing _____

Instructions: The following list represents examples of responsibilities, techniques and skills that a nurse may use in giving patient care. Careful checking of the list will assist us in planning the content of the course and arranging for practice. Please check the appropriate column.

Nursing Care Activities	Have Never Done	Need Review of Skill	Can Perform Without Review
Skills and Procedures			
Ace bandages.....			
Bath and personal hygiene.....			
Binders:			
Breast.....			
Scultetus.....			
"T".....			
Catheterization:			
Insert straight catheter.....			
Insert Foley catheter.....			
Remove Foley catheter.....			
Sterile specimen.....			
Cold applications:			
Compress.....			
Ice cap.....			
Dressings:			
Dry sterile.....			
Wet sterile.....			
Colostomy.....			
Enemas:			
Soapsuds.....			
Medicated.....			
Packaged.....			
Gastric feeding.....			
Heat applications:			
Compresses.....			
Hot water bottle.....			
Heat lamp.....			
"K" pad.....			

Self-Evaluation Guide

Nursing Care Activities	Have Never Done	Need Review of Skill	Can Perform Without Review
Infection control:			
Hand washing.....			
Dust management.....			
Handling of soiled items....			
Isolation technique.....			
Inhalations: humidity			
Steam.....			
Aerosol and other drugs.....			
Intermittent positive pressure.....			
Intravenous therapy:			
Starting or assisting with..			
Adding bottles.....			
Regulating flow			
Discontinuing.....			
Working with transfusions...			
Irrigations:			
Bladder.....			
Colostomy.....			
Gastrostomy tube.....			
Nasal-gastric tube.....			
Wound.....			
Medications:			
Apothecary system.....			
Metric system.....			
Oral administration.....			
Intramuscular injection.....			
Subcutaneous injection.....			
Installation:			
Ear drops.....			
Eye drops.....			
Nose drops.....			
Suppository.....			
Oxygen therapy:			
Nasal oxygen.....			
Tent.....			
Mask,.....			
Respirators:			
Bennett.....			
Bird.....			
Restraints:			
Limb.....			
Chest.....			
Posey belts.....			
Side rails.....			

Self-Evaluation Guide

Nursing Care Activities	Have Never Done	Need Review of Skill	Can Perform Without Review
Skin preparations, preoperative.....			
Specimens, collection of:			
Urine.....			
Single.....			
24 hour.....			
Clean, voided urine.....			
Stool.....			
Sputum.....			
Suction:			
Chest.....			
Gastric.....			
Nasopharyngeal.....			
Oral.....			
Tracheal.....			
Tracheal, through tracheostomy.			
Vital signs:			
Temperature.....			
Pulse.....			
Respiration.....			
Blood pressure.....			
Apical pulse.....			
Venous pressure.....			
Assistance with diagnostic tests and special procedures			
B. M. R.....			
Gastric analysis.....			
Glucose tolerance.....			
Liver biopsy.....			
Lumbar puncture.....			
Paracentesis.....			
Thoracentesis.....			
Pelvic examination.....			
Pap smear.....			
Protein-bound iodine uptake.....			
P. S. P.			
Rectal examination.....			
Urea clearance.....			
Radiology, special preparation for:			
G. I. series.....			
Gall bladder.....			
(Other).....			
Special Procedures and Equipment:			
Alternating pressure mattress...			
Casts.....			

Nursing Care Activities	Have Never Done	Need Review of Skill	Can Perform Without Review
Special Procedures and Equipment cont'd:			
Circ-O-lectric bed.....			
Crutch walking.....			
External cardiac massage.....			
Hypo-hyperthermy machine.....			
Lifts.....			
Monitors.....			
Mouth-to-mouth resuscitation.....			
Pacemaker.....			
Stryker frame.....			
Traction.....			
Team Leader Role			
Assessing patient needs.....			
Assigning work to auxilliary personnel.....			
Developing a care plan as a group.....			
Supervising others in giving care.....			
Evaluating care.....			
Teaching health.....			
Teaching team members.....			

NEW HAMPSHIRE HEALTH CAREERS COUNCIL
61 SOUTH SPRING STREET
CONCORD, NEW HAMPSHIRE

This questionnaire is part of our continuing search for contacting inactive registered nurses. We would appreciate your taking a moment to answer these few questions - briefly and very frankly.

1. What was your main reason for coming to the alumni meeting tonight?

2. Are you actively nursing at present? Yes_____ No_____

If NO: a. How long have you been inactive?

b. Why have you been inactive?

3. Do you think alumni meetings such as this, are appropriate occasions to discuss nursing problems such as: shortage of nurses, recruitment of inactive nurses and nurse refresher courses?

If you have any questions or suggestions, or would like more information, please contact us at the above address.

Barbara T. Jones, R. N., Coordinator
Inactive Health Personnel Project

PLEASE LEAVE THIS QUESTIONNAIRE WITH _____

THANK YOU!

- COPY -

Dear Sirs:

We are trying to locate inactive nurses in New Hampshire who have had education beyond the three year diploma level. I am writing to ask if you would please send us a list of nurses who are graduates of your nursing program(s) presently living in New Hampshire.

Thank you for your cooperation.

Sincerely,

Barbara T. Jones, R. N.
Coordinator
Inactive Health Personnel Project

BTJ/vrh

NEW HAMPSHIRE HEALTH CAREERS COUNCIL
61 SOUTH SPRING STREET
CONCORD, NEW HAMPSHIRE

April 1, 1969

Dear

We are asking for your help in an evaluation of the Registered Nurse refresher course in which you participated, that was sponsored cooperatively by the New Hampshire Health Careers Council, the New Hampshire Nurses Association, your area hospital and other local agencies.

We encourage you to be frank and constructively critical in your responses. The return envelope is enclosed to assist your prompt reply.

Thank you so much.

Sincerely,

Barbara T. Jones, R. N.
Coordinator
Inactive Health Personnel Project

BTJ/vrh
Encl.

NEW HAMPSHIRE HEALTH CAREERS COUNCIL
61 SOUTH SPRING STREET
CONCORD, NEW HAMPSHIRE

QUESTIONNAIRE TO TRAINEES OF R. N. REFRESHER PROGRAMS

1. How did you learn about the course? (check)

_____ Newspaper _____ Health Careers Council _____ Local Hospital
_____ Radio _____ Employment Security Office _____ Other

2. Would you have taken this course if it had obligated you to employment afterward?

_____ Yes _____ No _____ Undecided

3. What were your purposes for enrolling in the Refresher Course? (Use reverse side of paper if more space is required)

4. Were these purposes realized as a result of taking the course?

_____ Yes _____ No _____ In part
Explain briefly.

5. What kinds of work have you done since completing the course? Please state whether full or part-time and dates of employment.

Position	F.T./P.T.	Dates

6. Did the course prepare you for the work?

_____ Yes _____ No _____ In part
Explain briefly.

7. Have you any comments or suggestions regarding promotion of refresher courses for R. N.'s? (e.g. trainee recruitment methods, screening procedures, etc.) (Use reverse side of paper if more space is needed)

8. Do you know of other nurses in your area who would like to take a similar course?

_____ Yes _____ No (If yes, approximately how many?) _____

Date Refresher Course completed _____

Your Name (Optional) _____

Address _____

BTJ/vrh
4/1/69

NEW HAMPSHIRE HEALTH CAREERS COUNCIL
61 South Spring Street
Concord, New Hampshire

April, 1969

Dear

We are grateful to you for your help in responding to our recent questionnaire regarding R. N. refresher programs. We are now making tentative plans to hold a second course at the Wentworth-Douglass Hospital this spring. Since you mentioned that you know other nurses in your area who are interested in refresher training, we are writing to request their names and addresses. This form and the enclosed return envelope are for your convenience.

We would also be most grateful if you would help to spread this information and especially the personal benefits of such a course - as you experienced it.

Thank you again!

Very sincerely,

Barbara T. Jones, R. N.
Coordinator
Inactive Health Personnel Project

BTJ/mr

Name_____ Name_____

Address_____ Address_____

Name_____ Name_____

Address_____ Address_____

NURSE, YOU ARE NEEDED !!

We are looking for Registered Nurses who are thinking of returning to nursing and feel the need of a refresher course, to enroll in a class at the Wentworth-Douglass Hospital in Dover.

If THIS IS YOU - please complete this form and return it to us. If not, pass it on to another inactive nurse. Thank you!

New Hampshire Health Careers Council
61 South Spring Street
Concord, New Hampshire

Name:_____ Phone:_____

Address:_____

School of Nursing:_____ Yr. graduated:_____

Name on Diploma:_____

Please check each item:

1. Kind of nursing you would like to do:

   a. Hospital - Pediatrics _____ VNA _____
      Obstetrics _____ Nursing Home _____
      Med.-Surg. _____ Other_____
      (state preference)

   b. Full-time_____ Part-time _____

   c. Preferred shift:
      7 a.m./3 p.m._____ 3 p.m./11_____ 11 p.m./7 a.m._____
      Other _____

2. Preferred schedule for classroom and clinical practice:
   a. 5 days a week (Mon.-Fri.) for 4 weeks _____
      3 days a week (M.W.F.) for 7 weeks _____

   b. 7 a.m./3:30 p.m._____ 8 a.m./4:30 p.m._____ Other_____

3. If your attendance would be restricted to certain dates, please state briefly.

4. Other nurses that might be interested in the course:

	Name	Address
1.		
2.		
3.		
4.		

5/1/69

NEW HAMPSHIRE HEALTH CAREERS COUNCIL
61 SOUTH SPRING STREET
CONCORD, NEW HAMPSHIRE 03301

TO: Administrators and Directors of Nursing in Hospitals, Nursing Homes and other Health Agencies

FROM: Barbara T. Jones, R. N., Coordinator, Inactive Health Personnel Project
Irja Wilson, R. N., Consultant, Spaulding Small Hospital Project

CONCERNING: A proposed televised course for Registered Nurses in New Hampshire

A group of representatives from New Hampshire hospitals, nursing homes, public health, Department of Education, UNH Extension Service, Board of Nursing Education and Nurse Registration, and the N. H. Nurses Association are currently exploring the feasibility of scheduling a TV series, Return to Nursing, to be shown over the New Hampshire Educational Network beginning January, 1970.

The series consists of 25 thirty minute sessions which were produced for the State University of New York by the Russell Sage College Department of Nursing. The programs were designed as a refresher course to be used, in conjunction with class work and supervised clinical experience, to return the inactive graduate nurse to active duty. A course outline is available for use by the instructor (or student).

The series also lends itself for use in many other ways. With thoughtful planning and utilization of local resource persons, it can be used as the core of an inservice educational program in small hospitals and nursing homes. The plans are to show one lesson each week at a given time on a given day (e.g. Wednesday, 2:00-2:30 p.m.). The same lesson would be reshown later the same day (e.g. 10:30-11:00 p.m.). Discussion groups could be held at the time of the viewing or the next day to suit the needs of the group involved and to maximize the fullest utilization of the material.

In order to determine the amount of interest and the kinds of resources that would be available throughout the State, we are asking you to complete the enclosed questionnaire. Since a decision must be made on this matter within the next weeks, we would appreciate your prompt response.

Thank you for your cooperation.

BTJ/mr
Encl.
11/7/69

RETURN TO NURSING

PROGRAM DESCRIPTIONS OF EACH HALF HOUR LESSON IN THE TELEVISED SERIES

Please check (✓) the programs you think would be useful for your group and place an X before those that would not. If undecided, leave blank.

____ 1. THE CHANGING ROLE OF THE NURSE - Television instructor Marjory Keenan describes recent changes in hospital practices and nursing services.

____ 2. COMPREHENSIVE NURSING CARE, PART I - A patient (Mr. King) suffers a heart attack and is admitted to the hospital. Marjory Keenan discusses the principles of his nursing care and explains the pathophysiology of myocardial infarction.

____ 3. COMPREHENSIVE NURSING CARE, PART II - Mr. King's course is followed during the acute phase of his myocardial infarction. Marjory Keenan discusses his emergency treatment and subsequent nursing care.

____ 4. COMPREHENSIVE NURSING CARE, PART III - Mr. King begins to convalesce from his heart attack, and the public health nurse helps the family plan for his recovery at home. Marjory Keenan discusses anticoagulant therapy and rehabilitation.

____ 5. THE NURSING CARE PLAN - Marjory Keenan explains why the nursing care plan is needed and shows how to formulate and use it.

____ 6. MEDICATIONS - Marjory Keenan outlines principles of medication administration and demonstrates a drug order procedure, suggesting methods for the nurse to keep informed about new medications.

____ 7. INTRAMUSCULAR INJECTIONS - Marjory Keenan discusses the technique of intramuscular injection at various sites and looks at equipment and preparations currently in use for injections.

____ 8. THE PATIENT WITH PEPTIC ULCER: DIAGNOSIS - Incidence, contributory factors, and symptoms of peptic ulcer are explained. Marjory Keenan comments on the nurse's role in diagnostic tests.

____ 9. THE PATIENT WITH PEPTIC ULCER: NURSING CARE - Marjory Keenan discusses gastric physiology as related to nursing objectives for the patient with peptic ulcer. Medications, nurse's observations, health teaching and surgical procedures are explained.

____10. FLUID AND ELECTROLYTES - Basic principles of fluid and electrolyte balance are outlined by Marjory Keenan.

____11. INTRAVENOUS THERAPY - Marjory Keenan explains how I.V. fluid needs are determined. The lesson includes a demonstration of I.V. set-up and regulation of rate of flow and concludes with a discussion of the nurse's responsibility for I.V. therapy.

____12. PRE-OPERATIVE CARE - The nurse's role in preparing the patient for surgery, both physically and psychologically, is explained by Marjory Keenan.

____13. POST-OPERATIVE CARE - Marjory Keenan explains objectives of post-operative care and demonstrates how the nurse can implement them.

____14. INHALATION THERAPY - An orientation to current inhalation therapy equipment and rationale for nursing care follows a review of respiratory physiology.

____15. THE PATIENT WITH DIABETES - Marjory Keenan considers pathophysiology, diagnosis, and treatment of diabetes. She discusses the nurse's role with emphasis on teaching the diabetic patient.

____16. THE PATIENT WITH CVA: PART I - Marjory Keenan explains the pathophysiology of cerebral vascular accident as related to the nurse's understanding of how the stroke patient feels about his condition.

____17. THE PATIENT WITH CVA: PART II - Specific nursing care measures for the acute and convalescent stroke patient are outlined by Marjory Keenan.

____18. THE PATIENT WITH CANCER - Marjory Keenan explains how cancer growth affects the body, and introduces nurses to current cancer therapy and its implication for nursing care.

____19. THE PROBLEM OF INFECTION - Hospital infection incidence in recent years and the nurse's role in preventing spread of infection are discussed by Marjory Keenan.

____20. THE NURSING TEAM - Marjory Keenan describes the basic philosophy of team nursing and demonstrates two of its basic components: a team conference and an excerpt from an assignment conference.

____21. THE NURSE-PATIENT RELATIONSHIP - Marjory Keenan discusses principles of interpersonal relationships and communication skills, and shows how to apply them to patient care.

____22. CARE OF THE AGING PATIENT - Sister Mary Michele, administrator of the Ukhlein Mercy Center at Lake Placid, New York, talks with Marjory Keenan about the nurse's role in caring for the older patient.

____23. LEGAL ASPECTS OF NURSING - Mary Conway, consultant nurse for nursing service administration, New York State Department of Health, talks with Marjory Keenan about the law and the nurse.

____24. THE NURSE AND NEW EQUIPMENT - Nurses are introduced to the nurse's role in use of the Circo-Lectric bed, cardiac monitor, hemodialysis, and other new equipment

____25. WHAT'S AHEAD FOR NURSING? - Veronica Driscoll, deputy executive director, New York State Nurses Assocation, talks with Marjory Keenan about the profession's recent past and future and the role of the ANA.

PLEASE INDICATE YOUR INTEREST BY ANSWERING THE FOLLOWING QUESTIONS:

	Yes	No
1. Do you get good reception of Channel 11 (or 15, 40, 49, 52) in your institution or agency?	___	___
2. Are you interested in considering this series for In-Service Program?	___	___
If so, how large a group would you have? (Approximate)	_____	
3. Do you have a nurse on your staff who could lead follow-up discussions?	___	___
4. Could she attend a workshop to prepare for this role?	___	___
5. Do you have an appropriate room to use for this program?	___	___
6. Would you welcome R.N.'s from small nursing homes to join your group?	___	___
7. Are you interested in considering this series for a Refresher Course?	___	___
8. Could you provide the necessary clinical experience for refresher nurses?	___	___
9. Do you have access to the following reference materials?		
American Journal of Nursing	___	___
R. N.	___	___
Modern Hospital	___	___
Hospital Management	___	___
10. If you are in a small agency (1 or 2 nurses), would you be interested in:		
Joining with another group in your area?	___	___
Taking the course on your own?	___	___

Signed: _____

Institution: _____

Address: _____

_____

Please return completed form to:

N. H. Health Careers Council
61 South Spring Street
Concord, New Hampshire 03301

BTJ/mr
11/7/69

NEW HAMPSHIRE HEALTH CAREERS COUNCIL
61 South Spring Street
Concord, New Hampshire

July 31, 1969

TO: Waivered Licensed Practical Nurses in New Hampshire

FROM: Mrs. Iva Richardson, L.P.N.
President, Licensed Practical Nurses Association of N. H.

Mrs. Barbara T. Jones, R. N.
Coordinator, Inactive Health Personnel Project
New Hampshire Health Careers Council

Many of you have expressed interest in a course of studies that should qualify you to take the New Hampshire State Licensure Examination and become fully qualified Licensed Practical Nurses. We are, therefore, sending this questionnaire to all of you who are licensed by waiver in New Hampshire to find out just how many of you are really interested and would be able to enroll in such a course of study.

If you should decide to do this, it is important for you to understand that it might mean that you would have to:

1. Stop work (and earning) for at least six months to study full-time. If a combination work-study program were developed it might be longer.

2. Either temporarily move your place of residence, or travel daily to some city, where the course would have to be offered.

3. Meet the necessary physical and scholastic standards: completion of eighth grade or equivalency, clearance from a physician, and currently active in nursing.

So that we can determine just how much interest there is in this State for such a course, we are asking all of you to please fill out the enclosed form and return it to us as soon as possible. We will then let you know if there are enough interested applicants to warrant developing such a course.

Thank you for your help.

BTJ/vrh
Encl.

QUESTIONNAIRE FOR WAIVERED L.P.N.'S INTERESTED IN ACCELERATED COURSE

Name_____ Phone No._____

Address_____

N. H. License No._____ Yr. of Birth 19____

Check the following:

1. I could stop work and earning to take this course. Yes____ No____

2. I could move away from home temporarily to take a course in another part of the state. Yes____ No____

3. The furthest distance I would be able to travel to attend a course would be:
   Not more than 15 or 20 miles ____
   Not more than 20 to 40 miles ____
   Other (specify)

Please list nursing courses taken:

Name of School/Institute	Title of Course	Date Begun	Date Completed

Medical or nursing experience in Military Service No____ Yes____ # Yrs.____
Nature of experience. (Specify)

Please list your work history for the past 10 years:

Employer and Address	Duties	Date Employed
		_____ to
		_____
		_____ to
		_____
		_____ to
		_____

Return completed form to: N. H. Health Careers Council, 61 South Spring St., Concord, New Hampshire 03301

NEW HAMPSHIRE HEALTH CAREERS COUNCIL
61 SOUTH SPRING STREET
CONCORD, NEW HAMPSHIRE 03301

August 15, 1969

Dear _____:

I am writing in response to your letter requesting further information on the Accelerated Course that is being considered for Waivered L.P.N.'s in New Hampshire.

In 1965 and 1966 many unlicensed practical nurses took the New Hampshire State Board Examination for L.P.N.'s, but because they were not graduates of approved schools (see N. H. Nurse Practice Act for L.P.N.'s), their licenses had to be granted "by waiver". These licenses, as you probably know, cannot be used outside the State. Also, L.P.N.'s licensed by waiver are not permitted by Federal Law to function as charge nurses in Medicare Approved Extended Care Facilities.

For these reasons, as well as the salary differential that effects waivered L.P.N.'s employed in most institutions, we have been urged by the New Hampshire Association of L.P.N.'s to consider an accelerated six-month course that would eliminate the "by waiver" clause from the licenses of those who graduate from the course. Graduates of this course will be permitted to take the current State Board Examination. This should be easily accomplished as they will have just completed the accelerated course. They will then receive a <u>new</u> license and a <u>new</u> registration number, and will have full status as a Licensed Practical Nurse with no remaining trace of their former "waivered" status.

I hope that this explanation will answer any questions you may have.

Sincerely,

Barbara T. Jones, R. N.
Coordinator
Inactive Health Personnel Project

BTJ/mr

NEW HAMPSHIRE HEALTH CAREERS COUNCIL
61 SOUTH SPRING STREET
CONCORD, NEW HAMPSHIRE 03301

October 16, 1969

Dear _____:

This letter is a follow-up to the questionnaire mailed to all Waivered L.P.N.'s in New Hampshire last August.

As you can see in the enclosed summary of the returns on the questionnaire, there was not enough interest expressed to warrant the time and expense it would require to plan, accredit and finance a new training program.

Therefore, we are now in the process of exploring ways that would enable those few who are interested and able, to enroll in existing programs for Practical Nurses on an individualized basis. To proceed with this, we need further information from you. Will you please complete and return the enclosed card as soon as possible.

We will keep you informed as plans develop.

Very sincerely,

Barbara T. Jones, R. N.
Coordinator
Inactive Health Personnel Project

P. S.: If any of you are planning to take the high school equivalency exam you might like to consider enrolling in a course that will help to prepare you for this at Claremont Technical Institute, Wednesday evenings from 7 to 9 p.m. You should contact them immediately if you are interested.

BTJ/mr
Encl.

SUMMARY OF RESPONSES TO WAIVERED L.P.N. QUESTIONNAIRE

1. Number of Questionnaires mailed to Waivered L.P.N.'s: 493

   Number returned: 121 (25%)

   Number not returned 366 (74%)

   Number returned not opened: 6

2. Number of L.P.N.'s not interested in taking course: 61
   ("too old", unable, or disinterested)

3. Number undecided or requested further information: 18

4. Those interested in course:

   1) Number who could stop work and move temporarily: _____
      (All between ages of 40-65)

   2) Number who could stop work but could not leave home:

Area	Total
Manchester	3
Claremont	2
Portsmouth	5
Nashua	2
Concord	2
	14

   3) Number who are interested but must work and live at home:

Area	Total
Manchester	7
Claremont	6
Portsmouth	1
Nashua	1
Concord	1
Laconia	2
Keene	2
	20

1. I am still interested in a course. Yes___ No___
2. I have a high school diploma. Yes___ No___
   I passed the High School Equiv. Exam. Yes___ No___

FOR THOSE WHO MUST CONTINUE TO WORK WHILE STUDYING:

3. If classes were given in a.m. I could find evening employment, & visa versa. Yes___ No___
4. The minimum number of hours that I would <u>have</u> to continue to work while studying is _____ hours per week.

Name_____

Address_____

_____

COPY

N. H. DENTAL SOCIETY
N. H. DENTAL HYGIENISTS ASSOCIATION
N. H. DENTAL ASSISTANTS ASSOCIATION

February 21, 1968

Dear Colleague:

As you are well aware, there is a critical need for dental hygienists in New Hampshire. In an attempt to help alleviate this problem, a committee has been formed for the purpose of reactivating inactive dental auxiliary personnel.

As a first step, we are now in the process of contacting all of the known inactive registered dental hygienists to find out if any would be willing to return to work, either on a full or part-time basis.

Along with locating inactive dental hygienists, we are conducting the enclosed survey of dentists in order to identify employment opportunities for dental auxiliary personnel.

It is for this reason that we are requesting your assistance. Would you please complete and return the enclosed postcard by March 6th.

Your cooperation is very much appreciated.

Sincerely,

Advisory Committee for the Reactivation of Inactive
Dental Auxiliary Manpower:

Dr. William F. Argue
Mrs. Karen Bourk
Mrs. Carlotta O'Connor
Mrs. Gail Winkley
Dr. James M. Carew
Mrs. Norma Farretra

Mrs. Dorothy K. Rich, Coordinator
New Hampshire Health Careers Council

NEW HAMPSHIRE DENTAL SOCIETY

Advisory Committee for the Reactivation of Inactive Dental Auxiliary Manpower

1. Do you employ a dental assistant Yes___ No___
   dental hygienist Yes___ No___
   dental technician Yes___ No___

2. If one were available, would you employ a dental assistant Yes___ No___
   dental hygienist Yes___ No___
   dental technician Yes___ No___

   If not, why?_____

NAME AND ADDRESS_____

N. H. DENTAL SOCIETY
N. H. DENTAL HYGIENISTS ASSOCIATION
N. H. DENTAL ASSISTANTS ASSOCIATION

February 21, 1968

Dear Colleague:

As you may know, there is a critical need for dental hygienists in New Hampshire. In an attempt to help alleviate this problem, a committee has been formed for the purpose of reactivating inactive dental auxiliary personnel.

As a first step, we are now in the process of contacting all of the known inactive registered dental hygienists to find out if any would be willing to return to work, either on a full or part-time basis.

It is for this reason that we are requesting your assistance. Would you please complete and return the enclosed form as soon as possible, whether you are or are not currently practicing.

Your cooperation is very much appreciated.

Sincerely,

Advisory Committee for the Reactivation
of Inactive Dental Auxiliary Manpower

Dr. William F. Argue
Mrs. Karen Bourk
Mrs. Carlotta O'Connor

Dr. James M. Carew
Mrs. Gail Winkley
Mrs. Norma Farretra

Mrs. Dorothy K. Rich, Coordinator
New Hampshire Health Careers Council

SURVEY OF INACTIVE DENTAL AUXILIARY MANPOWER IN NEW HAMPSHIRE

1. Are you presently employed as a dental hygienist?

   Yes___ No___

   If Yes, answer only questions 6 and 7 and sign.

   If No, please answer all questions and sign.

2. Would you be interested in returning to work?

   Yes___ No___

   If Yes, Full time___ Part time___

3. If you are interested in returning to work, do you feel that you would need a refresher course?

   Yes___ No___

4. If you are unable to return presently, would you be interested in the future?

   Yes___ No___

5. Please specify your reason(s) for not returning to work.

6. Please give the names and addresses of any inactive dental hygienists that you know. (If necessary, please use back for additional space)

7. Please give names and addresses of any inactive dental assistants that you know. (If necessary, please use back for additional space)

YOUR NAME_____

ADDRESS_____

_____

February 1968
CONDUCTED BY: Advisory Committee for the Reactivation of Inactive Dental Auxiliary Manpower

N. H. DENTAL SOCIETY
N. H. DENTAL HYGIENISTS ASSOCIATION
N. H. DENTAL ASSISTANTS ASSOCIATION

May 20, 1968

Dear Dr.

As a result of the recent survey conducted by the N. H. Health Careers Council in cooperation with the Advisory Committee for the Reactivation of Inactive Dental Auxiliary Manpower, it has come to my attention that you are interested in employing a dental hygienist on a full or part-time basis, if one is available to you.

Therefore, I am including the names and addresses of these dental hygienists in your area who have indicated possible interest in returning to the dental hygiene profession.

If I can be of further assistance to you, please contact me at your convenience.

Sincerely yours,

Mrs. Karen Bourk
19 Temple Court
Manchester, New Hampshire 03104

N. H. DENTAL SOCIETY
N. H. DENTAL HYGIENISTS ASSOCIATION
N. H. DENTAL ASSISTANTS ASSOCIATION

May 20, 1968

Dear

As a result of the recent survey conducted by the N. H. Health Careers Council in cooperation with the Advisory Committee for the Reactivation of Inactive Dental Auxiliary Manpower, it has come to my attention that you have indicated possible interest in returning to the dental hygiene profession.

Therefore, I am including the names and addresses of the dentists in your area who are interested in employing a dental hygienist on a full or part-time basis. These dentists have been notified of your interest and may be contacting you in the near future.

If I can be of any further assistance, please contact me.

Sincerely yours,

Mrs. Karen Bourk
19 Temple Court
Manchester, New Hampshire 03104

N. H. DENTAL SOCIETY
N. H. DENTAL HYGIENISTS ASSOCIATION
N. H. DENTAL ASSISTANTS ASSOCIATION

June, 1968

Dear Colleague:

A survey of the dentists in New Hampshire was recently conducted. The results of the survey indicate that there is a need for more dental assistants. In an attempt to help alleviate this need, a committee has been formed for the purpose of reactivating inactive dental auxiliary personnel.

As one of the steps, we are now in the process of contacting all known inactive dental assistants to find out if any would be willing to return to work, either on a full or part-time basis.

It is for this reason that we are requesting your assistance. Would you please complete and return the enclosed form by June 30th, whether you are or are not currently practicing.

Your cooperation is very much appreciated.

Sincerely,

Advisory Committee for the Reactivation
of Inactive Dental Auxiliary Manpower

Dr. William F. Argue
Mrs. Karen Bourk
Mrs. Carlotta O'Connor

Dr. James M. Carew
Mrs. Gail Winkley
Mrs. Norma Farretra

Mrs. Dorothy K. Rich, Coordinator
New Hampshire Health Careers Council

SURVEY OF INACTIVE DENTAL ASSISTANTS IN NEW HAMPSHIRE

1. Are you presently employed as a dental assistant?

   Yes____ No____

   If Yes, answer only question 6 and sign.

   If No, please answer all questions and sign.

2. Would you be interested in returning to work?

   Yes____ No____

   If Yes, Full time____ Part time____

3. If you are interested in returning to work, do you feel that you would need a refresher course?

   Yes____ No____

4. If you are unable to return presently, would you be interested in the future?

   Yes____ No____

   If Yes, please specify the approximate year._____

5. Please specify your reason(s) for not returning to work.

6. Please give the names and addresses of any inactive dental assistants that you know. (If necessary, please use back for additional space)

YOUR NAME_____

ADDRESS_____

_____

June, 1968

CONDUCTED BY: Advisory Committee for the Reactivation of Inactive Dental Auxiliary Manpower

Please return to: N. H. Health Careers Council, 61 South Spring Street, Concord, New Hampshire

N. H. DENTAL SOCIETY
N. H. DENTAL HYGIENISTS ASSOCIATION
N. H. DENTAL ASSISTANTS ASSOCIATION
N. H. HEALTH CAREERS COUNCIL

September, 1968

Dear

As a result of the recent survey conducted by the N. H. Health Careers Council in cooperation with the Advisory Committee for the Reactivation of Inactive Dental Auxiliary Manpower, it has come to my attention that you have indicated possible interest in returning to dental assisting.

Therefore, I am including the names and addresses of the dentists in your area who are interested in employing a dental assistant on a full or part-time basis. These dentists have been notified of your interest and may be contacting you in the near future.

If I can be of any further assistance, please contact me.

Sincerely yours,

Mrs. Carlotta O'Connor Simcock
c/o James M. Carew, D.D.S.
Myrtle Street Ext.
Hillsboro, New Hampshire

NEW HAMPSHIRE DENTAL SOCIETY
NEW HAMPSHIRE DENTAL HYGIENISTS ASSOCIATION
NEW HAMPSHIRE DENTAL ASSISTANTS ASSOCIATION
NEW HAMPSHIRE HEALTH CAREERS COUNCIL

May, 1969

Dear

As you may remember, in September of 1968, the New Hampshire Health Careers Council conducted a survey in cooperation with the Advisory Committee for the Reactivation of Dental Auxiliary Manpower. The purpose of this survey was to identify inactive dental assistants and then to determine their future work plans. You were one of the dental assistants who indicated an interest in returning to employment. Based on this interest, the names of dentists in your area who had indicated a need were sent to you. Conversely, those dentists needing assistants were sent the names and addresses of those expressing an interest in returning to work by the end of 1969.

The Committee is now attempting to evaluate the effectiveness of this type of survey and follow-up. We are, therefore, requesting your help once more. Would you please complete and return the enclosed form by May 17, 1969. You will find, for your convenience, a stamped, self-addressed envelope.

Your cooperation is very much needed and appreciated.

Sincerely,

Barbara T. Jones, R. N.
Coordinator
Inactive Health Personnel Project

BTJ/vrh
Enc. (2)

NEW HAMPSHIRE HEALTH CAREERS COUNCIL
61 South Spring Street
Concord, New Hampshire

1. As a result of the survey in September, 1968, have you been contacted by a dentist during the past few months?

   _____Yes

   _____No

2. Are you presently employed as a dental assistant?

   _____Yes

   _____No

   If YES, Full-time _____

   Part-time _____

3. If you are not presently employed, do you anticipate returning to the field of dental assistant by the end of 1969?

   _____Yes

   _____No

COMMENTS: (Such as any impressions that you might have in regard to your personal reactions to these surveys and any suggestions for improvements.)

NAME:_____

ADDRESS:_____

May, 1969

N. H. SOCIETY OF MEDICAL TECHNOLOGISTS
N. H. SOCIETY OF PATHOLOGISTS
N. H. HEALTH CAREERS COUNCIL

June 7, 1968

Dear Colleague:

As you may know, there is a critical need for medical technologists in New Hampshire. In an attempt to help alleviate this problem, a committee has been formed for the purpose of reactivating inactive medical technologists.

As a first step, we are now in the process of contacting all of the known inactive registered medical technologists to find out if any would be willing to return to work, either on a full time or part-time basis.

It is for this reason that we are requesting your assistance. Would you please complete and return the enclosed form by June 30th, whether or not you are currently practicing.

Your cooperation is very much appreciated.

Sincerely,

Advisory Committee for the Reactivation
of Inactive Medical Technologists

E. Elizabeth French, M. D.
Raymond Methot, M. T. (ASCP)
Miss Elizabeth A. Ward, M. T. (ASCP)
Miss Beverly Yeaple, M. T. (ASCP)

Mrs. Dorothy K. Rich, Coordinator
Inactive Health Personnel Project

SURVEY OF INACTIVE MEDICAL TECHNOLOGISTS

1. Are you presently employed as a medical technologist? Yes___ No___

   If yes, only complete sections 6 - 8.
   If no, please complete all sections.

2. Reason(s) for not presently working as a medical technologist:

   Family Responsibility ___ Physically Unable ___ Been Away Too Long___
   Lack of Interest ___ Low Salary ___ Other (specify) ___

3. Would you be interested in returning to work? Yes___ No___

   If yes, Full time ___ Part time ___

4. If you are interested in returning to work, do you feel that you would need a refresher course? Yes___ No___ Uncertain___

   a. If yes, please indicate number of days a week, number of hours a week, time of day and season of year.

5 days___	6 hours___	evening___	fall___
3 days___	4 hours___	day ___	winter___
2 days___	3 hours___		spring___
			summer___

   b. Upon completion of a refresher course, what type of employment would you consider? Full time ___ Part time ___

5. If you are not presently interested in returning (with or without a refresher course), would you be interested in doing so at a later date? Yes___ No___

   If so, in how many years: 1___, 2___, 3___, 4___, more than 4___

6. Please give the names and addresses of any inactive medical technologists that you know. (If necessary, please use back for additional space)

7. Please give the names and addresses of any inactive laboratory technicians and assistants that you know. (If necessary, please use back for additional space)

8. NAME_____

   ADDRESS_____

   Year completed training_____ Length of training program_____

   Year of ASCP Registration _____ Is this current? Yes___ No___

Please return to: N. H. Health Careers Council, 61 So. Spring St., Concord,N.H.

SURVEY OF INACTIVE MEDICAL TECHNOLOGISTS
INTERESTED IN RETURNING TO EMPLOYMENT

August 1968

NAME:

ADDRESS:

TELEPHONE NUMBER:

YEAR OF ASCP REGISTRATION:

EMPLOYMENT EXPERIENCE:

	Full Time	Part Time	
Type_____	____	____	From 19__ to 19__
Type_____	____	____	From 19__ to 19__
Type_____	____	____	From 19__ to 19__
Type_____	____	____	From 19__ to 19__

LENGTH OF TIME SINCE LAST EMPLOYED:

COULD THE INDIVIDUAL RETURN TO WORK ON A FULL TIME BASIS?

Yes _____ No _____

IF NOT, WHICH OF THE FOLLOWING SCHEDULE(S) COULD SHE WORK?

_____Selected full days _____No. of days a wk.

_____Selected half days _____No. of days a wk.

_____Selected weekends

_____Selected evenings

IN ORDER TO ATTEND A REFRESHER COURSE, HOW MANY MILES WOULD SHE BE WILLING TO COMMUTE ONE WAY?

1-10_____ 11-20_____ 21-30_____ 31-40_____ Over 40_____

COMMENTS BY INTERVIEWER: (Please give your impression to the type, length, etc. of a training program you feel that the inactive medical technologist would need. (Use reverse side for additional space)

PLEASE RETURN TO: New Hampshire Health Careers Council
61 South Spring Street
Concord, New Hampshire 03301

NORTHERN NEW ENGLAND OCCUPATIONAL THERAPY ASSOCIATION
NEW HAMPSHIRE HEALTH CAREERS COUNCIL

June, 1968

Dear Colleague:

As you may know, there is a great need for occupational therapists in New Hampshire. In an attempt to help alleviate this problem, a committee has been formed for the purpose of reactivating inactive occupational therapists.

As a first step, we are now in the process of contacting all of the known inactive registered occupational therapists to find out if any would be willing to return to work, either on a full or part-time basis.

It is for this reason that we are requesting your assistance. Would you please complete and return the enclosed form by July 12th, whether you are or are not currently practicing.

Your cooperation is very much appreciated.

Sincerely,

Advisory Committee for the
Reactivation of Inactive
Occupational Therapists

Miss Virginia Bell, OTR
Miss Eileen Dixey, OTR
Mrs. Kathryn Whitman, OTR
Mrs. Dorothy K. Rich, Coordinator
Inactive Health Personnel Project

SURVEY OF INACTIVE OCCUPATIONAL THERAPISTS

1. Are you presently employed as an occupational therapist? Yes___ No___
   If Yes, only complete sections 7 and 8.
   If No, please complete all sections.

2. Reason(s) for not presently working as an occupational therapist:

   Family Responsibility___ Physically Unable___ Been Away Too Long___
   Lack of Interest ___ Low Salary ___ Other (specify) ___

3. Would you be interested in returning to work? Yes___ No___

   If Yes, Full time___ Part time___

4. If you are interested in returning to work, do you feel that you would need a refresher course?

   Yes___ No___ Uncertain___

   If Yes, please indicate number of days a week, number of hours a week, time of day and season of year:

5 days___	6 hours___	evening___	fall_____
3 days___	4 hours___	day ___	winter___
2 days___	3 hours___		spring___
			summer___

   In order to attend a refresher course, how many miles would you be willing to commute one way?

   1-10 ___ 11-20 ___ 21-30___ 31-40___ Over 40___

5. Upon completion of refresher course, what type of employment would you consider?
   Full time_____ Part time_____

6. If you are not presently interested in returning (with or without a refresher course), would you be interested in doing so at a later date?

   Yes___ No___ If Yes, in how many years? 1___, 2___, 3___, 4___,

   more than 4___.

7. Please give names and addresses of any inactive occupational therapists that you know (If necessary, please use back for additional space)

8. NAME_____

   ADDRESS_____

   Year completed training_____

   Number of years since last employment_____

SURVEY OF INACTIVE OCCUPATIONAL THERAPISTS
INTERESTED IN RETURNING TO EMPLOYMENT

August, 1968

NAME:

ADDRESS:

TELEPHONE NUMBER:

SCHOOL OF OCCUPATIONAL THERAPY ATTENDED:

Date of Graduation:

YEAR OF REGISTRY: _____

EMPLOYMENT EXPERIENCE: (Start with most recent)

	Full time	Part time	
Type_____	____	____	From 19__ to 19__
Type_____	____	____	From 19__ to 19__
Type_____	____	____	From 19__ to 19__
Type_____	____	____	From 19__ to 19__

LENGTH OF TIME SINCE LAST EMPLOYED:

COULD THE INDIVIDUAL RETURN TO WORK ON A FULL TIME BASIS? Yes____ No____

If not, which of the following schedule(s) could she work?

Selected full days_____ Number of days per week_____
Selected half days_____ Number of days per week_____

IN WHAT AREAS WOULD SHE PREFER TO WORK? (List in order of preference, 1 to 7, 1 being first choice)

Hospitals	____	Mental Retardation	____
Nursing Homes	____	Community Mental Health Centers	____
Outpatient Rehabilitation Centers	____	Home Health Agencies	____
Inpatient Rehabilitation Centers	____		

COMMENTS BY INTERVIEWER: (Please give your impressions as to type of refersher course the individual would need or any other pertinent information)

PLEASE RETURN TO: New Hampshire Health Careers Council
61 South Spring Street
Concord, New Hampshire 03301

NEW HAMPSHIRE HEALTH CAREERS COUNCIL
61 South Spring Street
Concord, New Hampshire

June 3, 1969

Dear

As part of our continuing effort to meet the local shortages in the health professions, we have compiled a list of the institutions in New Hampshire that have a current need for dietitians.

In a few days you should receive a copy of these institutions, with the names and telephone numbers of the persons to contact.

We are sharing this information with the thought that you, or some other dietitian, might be interested in knowing about these vacancies, and be in a position to help on a part-time consulting basis, if not full time.

We hope this effort will be of some value to all concerned.

Very sincerely,

Barbara T. Jones, R. N.
Coordinator
Inactive Health Personnel Project

BTJ/vrh

NEW HAMPSHIRE HEALTH CAREERS COUNCIL
61 South Spring Street
Concord, New Hampshire

THE FOLLOWING IS A LISTING OF FACILITIES IN NEW HAMPSHIRE IN NEED OF A DIETITIAN

Coos County Hospital*	Contact person: Mrs. Bouchard
West Stewartstown	Telephone: 246-3321
New Hampshire	
Littleton Hospital	Contact person: Mr. Schauer, Administrator
Littleton	Telephone: 444-3961
New Hampshire	
Huggins Hospital	Contact person: Mrs. Moore
Wolfeboro	Telephone: 569-2150
New Hampshire	
Wentworth-Douglass Hospital	Contact person: Miss Casey
Dover	Telephone: 742-5252
New Hampshire	
McKerley-Harris Hill	Contact person: Mr. McKerley
Nursing Home	Telephone: 753-6551
Boscawen	
New Hampshire	

LOOKING FOR QUALIFIED MALE FOOD DIRECTOR:

Notre Dame Hospital	Contact person: Sister Richer
Notre Dame Avenue	Telephone: 625-6961
Manchester, New Hampshire	

* Has urgent need

NEW HAMPSHIRE HEALTH CAREERS COUNCIL
INACTIVE HEALTH PERSONNEL PROJECT
61 South Spring Street
Concord, New Hampshire 03301

October 30, 1969

Dear _____:

Last spring we became aware of the need for dietitians in about seven of our New Hampshire hospitals. In July, a list of these hospitals and the names of the person to be contacted in each institution was sent to about twenty dietitians who were believed to be available, at least on a part-time basis.

In order to evaluate the effectiveness of this service, we are asking you to complete and return the enclosed questionnaire.

Thank you for your cooperation.

Sincerely,

Barbara T. Jones, R. N.
Coordinator
Inactive Health Personnel Project

BTJ/mr
Encl.

NEW HAMPSHIRE HEALTH CAREERS COUNCIL
INACTIVE HEALTH PERSONNEL PROJECT
61 SOUTH SPRING STREET
CONCORD, NEW HAMPSHIRE 03301

As a result of the New Hampshire Health Careers Council's efforts: (Please check each item)

	Yes	No
1. We were contacted by a dietitian.	____	____
2. The vacancy was filled.	____	____
3. The vacancy was partially filled.	____	____
4. The vacancy still exists.	____	____

Comment briefly on:

1. Our method of assistance:

2. Your dietary personnel needs:

BTJ/mr
10/30/69

NEW HAMPSHIRE HEALTH CAREERS COUNCIL
INACTIVE HEALTH PERSONNEL PROJECT
61 SOUTH SPRING STREET
CONCORD, NEW HAMPSHIRE 03301

QUESTIONNAIRE TO DIETITIANS

As a result of the New Hampshire Health Careers Council's efforts:

You contacted one of the institutions listed. Yes___ No___

Reason:

Comments:

Signed:_____

BTJ/mr
11/4/69

- COPY -

October 31, 1969

Dear Sir:

We are trying to locate inactive trained social workers who are graduates of professional schools. Therefore, I am writing to ask if you would please send us a list of the graduates of your school who are presently residing in New Hampshire.

Thank you for your help.

Sincerely,

Barbara T. Jones, R. N.
Coordinator
Inactive Health Personnel Project

BTJ/mr

NEW HAMPSHIRE HEALTH CAREERS COUNCIL

NEW HAMPSHIRE ASSOCIATION OF MEDICAL RECORD LIBRARIANS

In September, 1967 the New Hampshire Health Careers Council initiated a project to reactivate inactive health personnel. Mrs. Dorothy K. Rich was appointed the Coordinator. This Project came into existence as a result of a federal grant from USPHS, Bureau of Health Manpower. Forty-five states and the District of Columbia have been awarded such a grant, although the contracting agencies vary from state to state. These projects came about as a result of the great shortage of health manpower presently and the even greater and more critical shortage estimated for the future.

To reach the objective of assisting in the return of inactive health personnel to active employment, will, in brief, require four steps:

1) The identification of needs

2) The identification and recruitment of inactive health personnel

3) Implementation of refresher courses where indicated

4) Securing of funds for refresher programs

It is with the second step that Mrs. Rich and I are requesting your assistance. We are attempting to locate inactive record librarian personnel residing in New Hampshire. Would you kindly list on the attached form any inactive medical record personnel known to you. If a need is indicated by other surveys being done, any known inactive personnel will be contacted to see if there is interest in returning to employment, with or without refresher training on either a full or part-time basis.

Thank you for your cooperation.

Sister Mary Paul, President
N. H. Association of Medical Record
Librarians

NEW HAMPSHIRE HEALTH CAREERS COUNCIL
Inactive Health Personnel Project

Please list the names and addresses of inactive medical record library personnel for the following categories. If there is a Personnel Director in your hospital, he may be able to assist you. Thank you for your cooperation and assistance.

1. Transcriptionist

2. Coder

3. Clerks (Please Specify)

File Clerk

Insurance Clerk

Analysis Clerk

Statistical Clerk

Discharge Clerk

COMPLETED BY: _____

NAME AND ADDRESS OF HOSPITAL: _____

_____

PLEASE RETURN TO: N. H. Health Careers Council
61 South Spring Street
Concord, New Hampshire 03301

END